

FILED
IN CLERKS OFFICE

AO 242 (12/11) Petition for a Writ of Habeas Corpus Under 28 U.S.C. § 2241

UNITED STATES DISTRICT COURT
for theU.S. DISTRICT COURT
DISTRICT OF KANSASTERENCE L. THOMAS
Petitioner

v.

Case No.

(Supplied by Clerk of Court)

(FBIOP)
Amy Boncher (Warden)
Respondent

(name of warden or authorized person having custody of petitioner)

PETITION FOR A WRIT OF HABEAS CORPUS UNDER 28 U.S.C. § 2241

Personal Information

1. (a) Your full name: TERENCE LAMONE THOMAS
(b) Other names you have used: Kiamoni Lamone/THOMAS-Bey/mumia
2. Place of confinement:
(a) Name of institution: FMC DEVENS
(b) Address: 42 Patton Road
Ayer MA 01432
(c) Your identification number: 28044031
3. Are you currently being held on orders by:
 Federal authorities State authorities Other - explain:
Pending 4745 commitment
4. Are you currently:
 A pretrial detainee (waiting for trial on criminal charges)
 Serving a sentence (incarceration, parole, probation, etc.) after having been convicted of a crime
If you are currently serving a sentence, provide:
(a) Name and location of court that sentenced you: UNITED STATES DISTRICT COURT
of KANSAS
(b) Docket number of criminal case: 16-CR-10034
(c) Date of sentencing: April 21 2017
- Being held on an immigration charge
- Other (explain):

Decision or Action You Are Challenging

5. What are you challenging in this petition:

How your sentence is being carried out, calculated, or credited by prison or parole authorities (for example, revocation or calculation of good time credits)

Pretrial detention

Immigration detention

Detainer

The validity of your conviction or sentence as imposed (for example, sentence beyond the statutory maximum or improperly calculated under the sentencing guidelines)

Disciplinary proceedings

Other (explain): pending 4245 commitment; Involuntary medication; and competency for disciplinary proceedings

6. Provide more information about the decision or action you are challenging:

(a) Name and location of the agency or court: (FBoP)/John Joseph Moakley, US Courthouse, 1 courthouse way, Suite 2305, Boston ma 02210 (1st circuit)

(b) Docket number, case number, or opinion number: _____

(c) Decision or action you are challenging (for disciplinary proceedings, specify the penalties imposed):

the lost of over 280 days of gct(good conduct time)/good time credits

pending 4245 commitment; (findings for involuntary medication) and Approval

Competency for ~~disciplinary~~ disciplinary proceedings / due process hearing

(d) Date of the decision or action: 4/4/2019 (2/20/2019)

Your Earlier Challenges of the Decision or Action

7. ~~*First appeal/~~ Second appeal ~~*~~

Did you appeal the decision, file a grievance, or seek an administrative remedy?

Yes

No

(a) If "Yes," provide:

(1) Name of the authority, agency, or court: (FBoP) Warden Amy Bunches; Fmc DEVENS, unit TEAM; (informal resolution)

(2) Date of filing: Oct 21 2021

(3) Docket number, case number, or opinion number: _____

(4) Result: refile / pending

(5) Date of result: 1-22-2022

(6) Issues raised: involuntary medication, Competency for disciplinary proceedings, calculation of good time credits.

(b) If you answered "No," explain why you did not appeal: _____

8. **Second appeal** (first appeal)

After the first appeal, did you file a second appeal to a higher authority, agency, or court?

Yes No

(a) If "Yes," provide:

(1) Name of the authority, agency, or court: Northeast Regional of FBoP

(2) Date of filing: 3-10-21

(3) Docket number, case number, or opinion number: _____

(4) Result: Refile with warden /

(5) Date of result: 10/21

(6) Issues raised: involuntary medication; competency for disciplinary proceedings; ~~excessive~~ calculation of good time credits

(b) If you answered "No," explain why you did not file a second appeal: _____

9. **Third appeal**

After the second appeal, did you file a third appeal to a higher authority, agency, or court?

Yes No

(a) If "Yes," provide:

(1) Name of the authority, agency, or court: _____

(2) Date of filing: _____

(3) Docket number, case number, or opinion number: _____

(4) Result: _____

(5) Date of result: _____

(6) Issues raised: _____

(b) If you answered "No," explain why you did not file a third appeal: _____

10. **Motion under 28 U.S.C. § 2255**

In this petition, are you challenging the validity of your conviction or sentence as imposed?

Yes No

If "Yes," answer the following:

(a) Have you already filed a motion under 28 U.S.C. § 2255 that challenged this conviction or sentence?

Yes No

If "Yes," provide:

(1) Name of court: _____
(2) Case number: _____
(3) Date of filing: _____
(4) Result: _____
(5) Date of result: _____
(6) Issues raised: _____

(b) Have you ever filed a motion in a United States Court of Appeals under 28 U.S.C. § 2244(b)(3)(A), seeking permission to file a second or successive Section 2255 motion to challenge this conviction or sentence?

Yes No

If "Yes," provide:

(1) Name of court: _____
(2) Case number: _____
(3) Date of filing: _____
(4) Result: _____
(5) Date of result: _____
(6) Issues raised: _____

(c) Explain why the remedy under 28 U.S.C. § 2255 is inadequate or ineffective to challenge your conviction or sentence: I have challenged my sentence under 2255 motion. However have been at some time barred.

11. Appeals of immigration proceedings

Does this case concern immigration proceedings?

Yes No

If "Yes," provide:

(a) Date you were taken into immigration custody: _____

(b) Date of the removal or reinstatement order: _____

(c) Did you file an appeal with the Board of Immigration Appeals?

Yes No

If "Yes," provide:

(1) Date of filing: _____

(2) Case number: _____

(3) Result: _____

(4) Date of result: _____

(5) Issues raised: _____

(d) Did you appeal the decision to the United States Court of Appeals?

Yes No

If "Yes," provide:

(1) Name of court: _____

(2) Date of filing: _____

(3) Case number: _____

(4) Result: _____

(5) Date of result: _____

(6) Issues raised: _____

12. Other appeals

Other than the appeals you listed above, have you filed any other petition, application, or motion about the issues raised in this petition?

Yes No

If "Yes," provide:

(a) Kind of petition, motion, or application: Compassionate release / reduction in sentence

(b) Name of the authority, agency, or court: (FBoP) Administrative ~~remedy~~ review

(c) Date of filing: 8-6-21

(d) Docket number, case number, or opinion number: _____

(e) Result: refile / pending / detention at time

(f) Date of result: 12/17/21

(g) Issues raised: Debilitated medical condition, covid-19 DUF process; Competency, involuntary medication, ~~detention~~ deteriorating medical condition, hardship.

Grounds for Your Challenge in This Petition

13. State every ground (reason) that supports your claim that you are being held in violation of the Constitution, laws, or treaties of the United States. Attach additional pages if you have more than four grounds. State the facts supporting each ground.

GROUND ONE: Calculation of good time credits; I should have been found incompetent for disciplinary proceedings ~~for~~ and awarded my 280 of lost good time under hospitalization / hearing report of involuntary medication for psychiatric care or treatment

(a) Supporting facts (Be brief. Do not cite cases or law):

See hearing report. and d.c.l.f. file of TERENCE L. Thomas (mental health)/brief; I was in usmarshal custody, received a psychological evaluation and placed on medication, then moved to FBOP in care (IRC) with no medication and experienced a psychosis which I was placed in segregation received numerous incident reports ^(IR) sent to special nursing was removed then by mental health status transfer to devens(Fmc) I should have been found incompetent for (IR)

(b) Did you present Ground One in all appeals that were available to you?

 Yes No

GROUND TWO: pending 4245 commitment; ~~involuntary medication~~; ^{Involuntary medication;} I should be lifted of these administrative measures because I have developed from a ~~normal~~ state of psychosis that allows me to voluntarily take my medication. ~~normal~~

(a) Supporting facts (Be brief. Do not cite cases or law):

See individualized needs plan - program review.

I have completed over 10 programs to better myself and proceed with treatment as well as take my medication/ - injection ~~normal~~ when prescribed.

SEE hearing report.

SEE inmate health record.

(b) Did you present Ground Two in all appeals that were available to you?

 Yes No (wasn't aware of it)

GROUND THREE: disciplinary proceedings/competency; I had an emergency move order (mental health status transfer) and one process hearing for involuntary medication/psychiatric care - treatment ~~normal~~ ~~due process~~

(a) Supporting facts (Be brief. Do not cite cases or law):

SEE hearing report. / inmate health record.

because of my behavior / actions DUE PROCESS hearing is still in effect. I have not had the opportunity to appeal because of this as well as receive my G.C.T. / good time credits, or be taken of involuntary medication because I am hospitalized and receiving care/ treatment which I would like to be voluntary.

(b) Did you present Ground Three in all appeals that were available to you?

 Yes~~REAS~~ I do

GROUND FOUR: due process violation; there is no court order to force me to medicate me, nor was I present at due process hearing to conclude it. I have since been on forced/involuntary medication for 4 years and would like voluntary medication and to be compensated

(a) Supporting facts (Be brief. Do not cite cases or law.):

See (redacted) hearing report, / inmates health record,

SEE involuntary admissions! (highlighted)

SEE competence to give informed consent.

SEE treatment. (highlighted.)

SEE documentation (highlighted.)

(b) Did you present Ground Four in all appeals that were available to you?

Yes No

14. If there are any grounds that you did not present in all appeals that were available to you, explain why you did not:

not enough & reasurer / receive information at later time

Request for Relief

15. State exactly what you want the court to do: Compensate for due process violation, in monetary funds that is appropriate for four years of involuntary medication, receive voluntary treatment/or compassionate release-reduction in sentence, remove pending 4245 commitment, award get/good time credits of 280 or Appropriate amount.

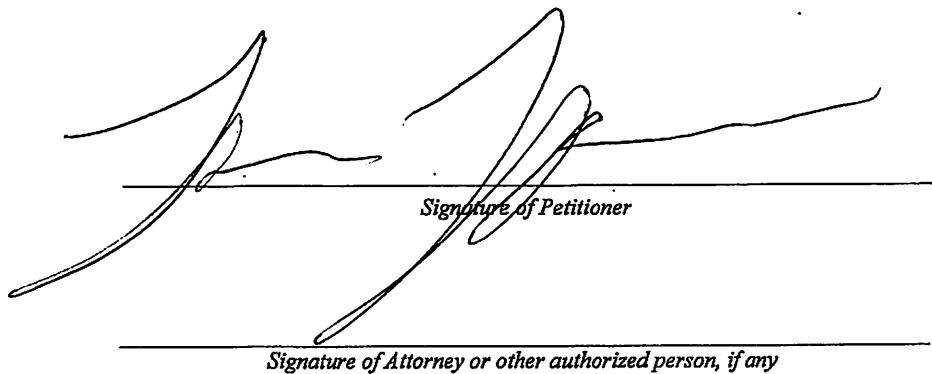
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Declaration Under Penalty Of Perjury

If you are incarcerated, on what date did you place this petition in the prison mail system:

I declare under penalty of perjury that I am the petitioner, I have read this petition or had it read to me, and the information in this petition is true and correct. I understand that a false statement of a material fact may serve as the basis for prosecution for perjury.

Date: 21 19 / 2022



The image shows two handwritten signatures. The top signature, written in black ink, is a stylized, cursive script that appears to read "John Doe". Below this signature is the text "Signature of Petitioner". The bottom signature is also in black ink and is a more fluid, cursive script. Below this signature is the text "Signature of Attorney or other authorized person, if any".